



SUMMER CONCERT PROGRAMS Participant Interest Form

NAME OF BAND: _____ GENRE: _____

Number of Band Members: _____

Do you have sufficient material to play/perform for 90 minutes? Y _____ N _____
(Attach sample sets or other supporting documentation)

Have you participated in our Summer Concert Programs? _____

If yes, which one and when? _____

Interest in performing in:

Music Under the Stars _____ Alfresco! Fridays _____ Both _____

Name of Manager or main contact: _____

Address: _____

Email(s): _____

Phone: (Home): _____ (Cell): _____

PLEASE SUBMIT THE FOLLOWING:

- ☐ Completed Participant Interest Form. Please type form. The form may be downloaded at www.elpasotexas.gov/mcad/music.asp.
- ☐ Attach a summary of professional history and biographical information
- ☐ Photographs (color and/or digital photos preferred)
- ☐ Demo CD, Cassette or DVD (CD and DVD preferred) of recent work/performances
- ☐ Samples of promotional materials; media coverage, professional reviews and/or critiques and/or letters of recommendation
- ☐ Schedule of upcoming performances
- ☐ Booking fees and related costs

(Continued)

Participant Interest Form and supplemental materials should be submitted on or before October 31, 2007 to the MCAD office by 5:00 p.m.

SEND INFORMATION PACKETS TO:

City of El Paso Museums and Cultural Affairs Department (MCAD)
Attention: Summer Concert Programs
Two Civic Center Plaza, 6th floor
El Paso, Texas 79901
Att: Ben Fyffe

If you are selected, MCAD will keep the submitted materials for promotional purposes.

In the event that you are not selected would you like to have your materials returned?

Y _____ N _____

Have you included a self addressed self-stamped enveloped (required for return of materials)?

Y _____ N _____